# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

(In the space above enter the full name(s) of the plaintiff(s).)

SINSTRICT OF SELAWARE

2017 MAY 22 AM 11: 34

-against-

Civ. Action No. 17 - 58 7
(To be assigned by Clerk's Office)

Resources of Human Development (RHD)

Michael Brothers, Unit Director.

Angela Robinson, Supervisor.

Dutricea Hill Intern

In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Section I. Do not include addresses here.)

## COMPLAINT

(Pro Se)

Jury Demand?

□Yes

□ No

## NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

If this is an employment discrimination claim or social security claim, please use a different form.

Plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

## I. PARTIES IN THIS COMPLAINT

### **Plaintiff**

List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff:	Lozano, Xion Name (Last, First, MI)	TARA G	
	103 Ashley A. Street Address		
	Townsend County, City	State	1973 4 Zip Code
	302.287.1782 Telephone Number		ano 73 <u>Qamail. Com</u> Idress (if available)

## Defendant(s)

List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant 1:	Resources for Huma,	n Develop	MENT
	Name (Last, First)		
	4700 Wissahick	ON Avenu	e, Suite # 126
	Street Address	0 1	10 11 1010
	Philadelphia	PA	19144.4248
	County, City	State	Zip Code
Defendant 2:	Brothers, Mi	chael	
	Name (Last, First)		
	2055 Limestone	Road	
	Street Address		
	Wilmington	DE	19808
	County, City	State	Zip Code

Defendant(s) (	Continued		
Defendant 3:	Robinson, A. Name (Last, First)	ngela	
	2055 Limesta Street Address	ne Roa	<u>d</u>
	Wilming toN County, City	State State	19808 Zip Code
Defendant 4:	Hill , Patrice Name (Last, First)	ia	
	2055 Limest	one Roa	rd
	Wilmington County, City	, DE State	
		State	Zip Code
II. BASIS FO	DR JURISDICTION		
Check the option to	hat best describes the basis for	jurisdiction in you	case:
☐ U.S. Governme	ent Defendant: United States o	or a federal official	or agency is a defendant.
•	itizenship: À matter between in in controversy exceeds \$75,000	-	ate citizens of different states
Federal Quest	tion: Claim arises under the Con	nstitution, laws or t	reaties of the United States.
rights have been vi	es		·
Notice OF	Charge of Disc	criminati	ON, 19 DEL. Code
5712 file	ed under the f	lae Discri	mination in
Employme	ent Act OF 19	67 as a	mended (ADEA)
that is, b	based on age	40 or	on, 19 DEL. Code imination in mended (ADEA) olden.

#### III. VENUE

This court can hear cases arising out of the Counties of New Castle, Kent, and Sussex in the State of Delaware.

Under 28 U.S.C § 1391, this is the right court to file your lawsuit if: (1) All defendants live in this state AND at least one of the defendants lives in this district; OR (2) A substantial part of the events you are suing about happened in this district; OR (3) A substantial part of the property that you are suing about is located in this district; OR (4) You are suing the U.S. government or a federal agency or official in their official capacities and you live in this district. Explain why this district court is the proper location to file your lawsuit.

Venue is appropriate in this Court because: Discrimination CIAIM

Delaware law makes it illegal for an employer
to discriminate on the basis of Age. The
Delaware law makes it illegal for an employer to discriminate on the basis of Age. The Plaintiff, age 51, on December 02, 2016.

IV. STATEMENT OF CLAIM Resources of Human Development 2055 Limestone Road Vilmington, DE 19808

Place(s) of occurrence:

Date(s) of occurrence: October 17,2016 - December 02,2016

State here briefly the FACTS that support your case. Describe how each defendant was personally involved in the alleged wrongful actions.

## **FACTS:**

Michael Brothers, unit manager and Supervison, AngelA Robinson, Created a hostile work environment through repeated acts of intimidation and What happened to of discharge and spoke to the Plaintiff you? rending tone, because of my achthers, angela Robinson and

	workers when communicating with them. Also, Patricia Hill, the Intern stated to Plaintiff, "no Black woman at your age should be sifting at the clinician's desk." Patricia Hill wrote an e-mail to Michael Brothers and Angela Robinson which resulted in the Plaintiff's termination Patricia Hill (white), threatened that she would have the Plaintiff job upon her graduation.
Was anyone else involved?	Patricia Hill, Intern, wrote an e-mail to Angela Robinson supervisore about false Statements against my work ethics. Angela Robinson and Michael Brothers entertained "Workplace Bullying" from
	Statements against my work ethics.
	entertained "WorkPlace Bullying" from
	tatricia Hill. Michael Brothers terminated the Master Clinician position to replace
	for a youngen Cinician.

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Computer. Mich	collected RHD Cell phone,
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	ar and told me to leave
Immediately. of	ff the premises. The Plains
took Client hon	

## V. INJURIES

If you sustained injuries related to the events alleged above, describe them here.

The Plaintiff, was discharged in response to a complaint made by the intern, fatricia Hill. Not withstanding the fact, under Delaware law, a single instance of Misconduct that was alleged may form the basis for discharge, but only where the employer warned the employee of the consequences of such action, and had not tolerate similiar actions in the past. VIAB V Martin, 431 A2d 1265 (DEI 1981).

## VI. RELIEF

The relief I want the court to order is:

Money damages in the amount of: \$2.4 million dollars
Other (explain): Reinstate Plaintiff as a Master Clinician out \$45.00 an hour at 40 hours
per weeks and treat the Plaintiff in a professional Manner. The Plaintiff was disharded from Resources for Human Development (RHD)
Without just cause in connection with my work. Notice of Charge of Discrimination,
19 DEI. Code \$712 filed under the Age
Discrimination in Employment Act of
1967 as amended (ADEA). That is,
based on Age 40 or older.

## VII. CLOSING

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; and (3) complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

05/22/2017	Yumaia & Lozano
Dated	Plaintiff's Signature
Lozano, Liomara Printed Name (Last, First, MI)	E
103 Ashley Ann Court Address City	Townsend, DE 19734 State Zip Code
302,2871782	X 102ano 73 @ gmail.com
Telephone Number	E-mail Address (if available)

List the same information for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.